#	
A	9
1/4	50
1.	/-
W.	3

PATENT	APPLICATION	FEE DE	TERMINATIO	N RECORD

Effective January 1, 2003

Application or Docket Number

10/174487

•		CLAIMS AS	S FILED -	PART		:		SMALL EI	NTITY		OTHER	THAN
		(Column 1)		(Column 2)			TYPE		OR			
TOTAL CLAIMS		30	λ				RATE	FEE		RATE	FEE	
FC)R		NUMBER	FILED	NUMB	ER EXTRA		BASIC FEE	#395	OR	BASIC FEE	\$790
TOTAL CHARGEABLE CLAIMS 32 minus 20			nus 20=	*	12		X\$ 2 5≡	14.	OR	X\$ <i>57</i> =		
INE	EPENDENT CI	LAIMS		→ minus 3 = *				YOU		OR	×200=	
MULTIPLE DEPENDENT CLAIM PRESENT			. ,							···		
* If the difference in column 1 is less than zero, enter "0" in column 2						· .	+/86		OR	+360= TOTAL		
	C	LAIMS AS A	MENDE) - PAR	T II		in.	TOTAL		lou	OTHER	ΤΗΔΝ
		(Column 1)		(Colur	nn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MENDMENT	Total	*	Minus	**				X\$ \$ =		OR	X\$ 4 %=	
AME	Independent	*	Minus	***		.		760 X 42 =		OR	240 X840	
	FIRST PRESE	ENTATION OF MU	JLTIPLE DEI	PENDENT	CLAIM			180 + 140 =		OR	360	
								TOTAL		OR OR	TOTAL	
		(Column 1)		(Colur	nn 2)	(Column 3)		ADDIT. FEE I			ADDIT: FEE	
NT B		CLAIMS REMAINING AFTER WAMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL :FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total:	*	Minus	**				25 X\$ ₽≡≠		ÖΑ	XX Ex	
MEN	Independent		Minus	***				100	D. G.		200 X 0 4≡	
A	FIRST PRESE	NTATION OF MU	JETIPLE DE	PENDENT	CLAIM			180		OR	300	
							TOTAL		OF	TOTAL		
								ADDIT, FEE		OR	ADDIT FEE	
24.5		(Column 1) = CLAIMS		(Colur HIGH		(Column 3) I	1 .					
J		HEMAINING AFTER		PREVIO		PRESENT: EXTRA		RATE	ADDI. TIÖNAL		RATE	ADDI: TIONAL
ME		AMENDMENT		PAID	FOR			251	FEE			FEE
AMENDMENT C	Total Independent		Minus Minus	**				X\$ % =		OR	X\$ 18 = 200	
AM		NTATION OF MI	位于14年20日	等级数据	CLAIM			X 42 0		OR:	. X 64 ≞	
										OR⁻	3 6 ∰	
	If the entry in colu If the "Highest Nu	mn 1 is less than th mber Previously Pa	e entry in colu id For' IN THI	mn 2, write S SPAGE i	"0" in col	umn 3 n 20, enter: 20		TOTAL DDIT FEE		ÖR.	TOTAL	
***	If the "Highest Nu	mber Previously Pa nber Previously Pai	aid For IN TH	SSPACE	s less tha	n 3, enter 3."			ropriate box	3 3	ADDIT FEE! umn 1.	12 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1